

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		05/08-01
O.I.P.E. CLASSIFIER		12	5/29
FORMALITY REVIEW	B.E.	897	06-18-01
RESPONSE FORMALITY REVIEW	A-S	943	10-23-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral).... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	4/5/2
2	4/5/2
3	4/5/2
4	4/5/2
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Claim	Date
Final	
Original	
51	5/5/2
52	5/5/2
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here